



Waiting for a visa from Uncle Sam

Canadian physicians intending to move to the US have to tell immigration officers at the border if they are mentally retarded, insane, have ever been insane, have AIDS or have more than 1 spouse. They must also tell the officers that they are physicians.

A pamphlet published by the US Immigration and Naturalization Service (INS) lists 37 ways in which an immigration officer can refuse entrance to the US. Number 36 states that if you a medical doctor entering the US for purposes of employment, you must declare that fact. The final provision, number 37, declares that if you were a Nazi and persecuted anyone during WW II, you may also be refused entrance.

A literal reading suggests that physicians rank significantly lower on the list than the mentally challenged but slightly higher than war criminals. "Anyone who would go into medicine is, by definition, insane," said one physician who studied the list.

The North American Free Trade Act (NAFTA) provides no loopholes that will make entry easier. In fact, while religious workers, psychological counsellors and lawyers are able to take advantage of "free movement" under NAFTA, physicians intending to cross the border to work are specifically excluded. Only doctors planning to take up research or teaching positions

enjoy the specific NAFTA provision of free movement.

All other physicians must comply with INS and Department of Justice provisions and show they will not be a burden on the public weal if permitted to move south. The pathway around INS provision 36 is to prove that *if* you are a physician intending to practise medicine in the US, you have completed medical exams equivalent to the American National Medical Boards.

At this point a round of applause must go to creators of the Medical Council of Canada Qualifying Examination Part II, which has done nothing to further employment mobility within Canada — that was its original goal — but is an excellent qualification for emigration to the US. Every cloud does have a silver lining.

The INS and NAFTA restrictions truly become a triple threat when married to the National Visa Center (NVC) in Portsmouth, NH. It recently began central processing of *all* visa applications made to the US. Previously, Canadian consulates had handled visa applications made from Canada. Now, the NVC is learning how to handle its computer and its new Canadian applicants at the same time.

Is the process onerous? Definitely.

Time-consuming? Yes.

Worth it? We'll keep you posted.

consin had raised their eyebrows when he told them about the sick patients for whom he could not arrange a hospital bed.

Those same doctors winced when he told them about Alberta's long waiting lists for emergency surgery. And they simply did not believe him when he said an elective cardiology consult could take up to 3 months.

"Gee," one earnest physician told us at a meet-and-greet recruiting dinner, "I guess our biggest problem here would be . . . well, I don't know. I suppose it would be asking the patient which cardiologist he preferred to go to." The other American doctors nodded their assent. When asked what the waiting list for coronary artery bypass surgery was in their system, they weren't sure if it was 4, or maybe 5, days.

That was when the fat lady began to sing. The 3-year, on-again, off-again running courtship between my husband and the American recruiters was over. It was time to call the movers.

Medical concerns may have prompted the move, but financial considerations were involved as well. A salaried employee position, which my husband accepted, produces no overhead costs. We turned down offers from hospitals that wanted to employ a doctor for a limited period, and then bequeath the built-up practice to him at a later date. If you are selling your soul, we reasoned, it